

New Mexico Regulation and Licensing Department

HEALTH CARE PROFESSIONAL LICENSING ISSUES

Marguerite Salazar, Superintendent Linda Trujillo, Deputy Superintendent September 16, 2020

Our Mission

To ensure New Mexicans receive quality care and services from qualified professionals.

Who We Are

When visiting a dentist for a cleaning, sitting in the barber's chair for a trim or trying to read the alphabet chart for an eye exam, you may take for granted the qualifications of professionals providing these services, but the New Mexico Regulation & Licensing Department (RLD) doesn't.

The New Mexico Regulation and Licensing Department is in the business of ensuring that New Mexicans receive quality care and services from qualified individuals and businesses in 35 different industries, professions and trades. We touch everyday activities of every New Mexican, while ensuring fair and prompt administrative process to help spur economic development.





What We Do

We certify and regulate over 425,000 individuals and businesses across New Mexico that fall into the following five divisions:

Alcoholic Beverage Control issues, transfers and revokes liquor licenses as per the provisions set forth in the Liquor Control Act. It also administers the Alcohol Server Training Program and the .

Boards and Commissions Division oversees more than 30 different professions and trades, from accounting to funeral services.

Construction Industries Division licenses contractors and certifies journeymen in the building trades; issues permits for residential and commercial construction; and conducts field inspections of building, electrical, mechanical and LP Gas construction to confirm that the work meets state standards. It also oversees manufacturers, dealers, brokers, salespersons, installers and repairmen of manufactured housing units.

Financial Institutions Division regulates state-chartered banks, savings and loans, credit unions, trust companies, collection agencies, endowed care cemeteries, small loan and motor vehicle finance companies, mortgage lenders and loan brokers.

Securities Division licenses broker-dealers, financial advisers and other investment professionals; registers certain securities offered in New Mexico; investigate financial fraud and provide education and consumer outreach to protect investors.



RLD Health Practitioner Boards

- Acupuncture and Oriental Medicine
- Athletic Trainers
- Counseling and Therapy Practice
- Chiropractic
- Dental Health
- Massage Therapy
- Nutrition and Dietetics
- Occupational Therapy
- Optometry

- Osteopathic Medicine
- Pharmacy
- Physical Therapy
- Podiatry
- Psychologist Examiners
- Respiratory Care (Advisory)
- Social Work
- Speech-Language Pathology, Audiology and Hearing Aid Dispensing Practices



RLD Health Practitioner Licensing

- Acupuncture and Oriental Medicine (879)
 Podiatry (146)
- Athletic Trainers (184)
- Counseling and Therapy Practice (4,801)
 Respiratory Care (1,240)
- Chiropractic (593)
- Dental Health (7,589)
- Massage Therapy (3,586)
- Nutrition and Dietetics (473)
- Occupational Therapy (1,627)
- Optometry (292)
- Osteopathic Medicine (985)
- Pharmacy (25,509)
- Physical Therapy (2,874)

- Psychologist Examiners (903)
- Social Work (4,724)
- Speech-Language Pathology, Audiology and Hearing Aid Dispensing Practices (2,171)



Sunset Act

NMSA 1978, § 12-9-11 et seq.

- Athletic Trainers
- Counseling and Therapy Practice
- Chiropractic
- Massage Therapy
- Nutrition and Dietetics
- Occupational Therapy
- Osteopathic Medicine

- Physical Therapy
- Psychologist Examiners
- Respiratory Care
- Speech-Language Pathology, Audiology and Hearing Aid Dispensing Practices



Expedited Licensure

NMSA 1978, § 61-1—31.1

61-1-31.1. Expedited licensure; issuance.

A. A state agency, board or commission that issues an occupational or professional license pursuant to Chapter 61, Articles 2 through 14E, 24, 24A and 31 NMSA 1978 shall, as soon as practicable after a person files an application for a license accompanied by any required fees:

- (1) process the application; and
- (2) issue a license to a qualified applicant who submits satisfactory evidence that the applicant:
 (a) holds a license that is current and in good standing issued by another jurisdiction in the
 United States that has met the minimal licensing requirements that are substantially equivalent
 to the licensing requirements for the occupational or professional license the applicant applies
 for pursuant to Chapter 61, Articles 2 through 14E, 24, 24A and 31 NMSA 1978; and
 (b) has provided fingerprints and other information necessary for a state and national criminal
 background check, if required.

Expedited Licensure - Military

NMSA 1978, § 61-1—34

61-1-34. Expedited licensure; military service members, spouses and dependents; waiver of fees; recent veterans.

A. A state agency, board or commission that issues an occupational or professional license pursuant to Chapter 61 NMSA 1978 shall, as soon as practicable but no later than sixty days after a military service member or a recent veteran <u>files an application</u>, and <u>provides all of the documents required for the application</u>, for a license accompanied by the required fees:

- (1) process the application; and
- (2) issue a license to a qualified applicant who submits satisfactory evidence that the applicant holds a license that is current and in good standing, issued by another jurisdiction, including a branch of the armed forces of the United States, and has met minimal licensing requirements that are substantially equivalent to the licensing requirements for the occupational or professional license that the applicant applies for pursuant to Chapter 61 NMSA 1978.



Board Authority – Osteopathic Medicine

61-10-5. Board of osteopathic medicine; appointment; terms; meetings; membership; examinations; duties; powers. (Repealed effective July 1, 2022.)

A. The "board of osteopathic medicine" is created. The board shall be administratively attached to the regulation and licensing department.

C. The board shall:

- (1) issue licenses to individuals who meet the qualifications for licensure as osteopathic physicians or osteopathic physician assistants;
- (2) discipline osteopathic physicians and osteopathic physician assistants for incompetence or unprofessional or dishonorable conduct;
- (3) protect the public from the unauthorized practice of osteopathy;
- (4) enforce and administer the provisions of the Osteopathic Medicine Act;
- (5) adopt and promulgate in accordance with the Uniform Licensing Act [61-1-1 to 61-1-31 NMSA 1978] and the State Rules Act [Chapter 14, Article 4 NMSA 1978] all rules for the implementation and enforcement of the Osteopathic Medicine Act. Rulemaking shall include adoption and promulgation of rules related to the management of pain based on a review of national standards for pain management;

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Board Authority – Counseling

61-9A-7. Board created; members; appointment; terms; compensation. (Repealed effective July 1, 2022.)

A. There is created the "counseling and therapy practice board". The board is administratively attached to the department.

61-9A-8. Department duties. (Repealed effective July 1, 2022.)

The department, with the consultation of the board, shall:

- A. process applications;
- B. conduct and review the required examinations;
- C. issue licenses and certificates of registration to applicants who meet the requirements of the Counseling and Therapy Practice Act;
- D. administer, coordinate and enforce the provisions of the Counseling and Therapy Practice Act and investigate persons engaging in practices that may violate the provisions of that act;
- E. approve the selection of primary staff assigned to the board;
- F. maintain records, including financial records; and
- G. maintain a current register of licensees and registrants as a matter of public record.



Board Authority – Counseling

61-9A-9. Board; powers and duties. (Repealed effective July 1, 2022.)

- A. The board may:
 - (1) adopt in accordance with the Uniform Licensing Act [61-1-1 to 61-1-31 NMSA 1978] and file in accordance with the State Rules Act [Chapter 14, Article 4 NMSA 1978] rules necessary to carry out the provisions of the Counseling and Therapy Practice Act;
 - (2) select and provide for the administration of, at least, semiannual examinations for licensure;
 - (3) establish the passing scores for examinations;
 - (4) take any disciplinary action allowed by and in accordance with the Uniform Licensing Act;
 - (5) censure, reprimand or place a licensee or registrant on probation;
 - (6) require and establish criteria for continuing education;
 - (7) establish by rule procedures for receiving, investigating and resolving complaints;
 - (8) approve appropriate supervision and postgraduate experience for persons seeking licensure or registration;
 - (9) provide for the issuance of licenses;
 - (10) determine eligibility of individuals for licensure or registration;



National Compacts – Physical Therapy

The Physical Therapy Compact is an agreement between member states to improve access to physical therapy services for the public by increasing the mobility of eligible physical therapy providers to work in multiple states.

The Physical Therapy Compact Commission is the governing body comprised of the member states established to implement the provisions of the PT Compact.

A map of compact member states is available at: http://ptcompact.org/ptc-states



National Compacts – Counseling

The ACA Licensure Portability Model, passed by the Governing Council in June 2016 and reaffirmed this past March, calls for counselors who are licensed in one state and have no disciplinary record to become eligible for license "in any state or U.S. jurisdiction in which they are seeking residence." The model allows that states may require these counselors to take a jurisprudence exam to verify that they are knowledgeable about the laws in that particular state.

To become a reality, the ACA Licensure Portability Model must first be adopted by individual <u>state licensing boards</u> across the U.S. The procedure for taking this action varies from state to state. Some licensing boards possess the ability to change regulations on their own, whereas others must first petition their respective state legislature.

Art Davalos-Matthews June, et al. "ACA Continues Push Forward for Licensure Portability." *Counseling Today*, 10 Sept. 2019, ct.counseling.org/2017/06/aca-continues-push-forward-licensure-portability/.



National Compacts – Psychology

The Psychology Interjurisdictional Compact (PSYPACT) is an interstate compact designed to facilitate the practice of telepsychology and the temporary in-person, face-to-face practice of psychology across state boundaries.

The PSYPACT Commission is the governing body of PSYPACT responsible for creating and finalizing the Bylaws and Rules and Regulations. The Commission is also responsible for granting psychologists the authority to practice telepsychology and temporary in-person, face-to-face practice of psychology across state boundaries.

Telepsychology In order to practice telepsychology in PSYPACT states, psychologists licensed in PSYPACT states only can apply to the PSYPACT Commission for an Authority to Practice Interjurisdictional Telepsychology (APIT). One required component of this authority granted from the PSYPACT Commission is that psychologists must obtain an E.Passport Certificate from ASPPB.

Temporary PracticeIn order to conduct temporary practice in PSYPACT states, psychologists licensed in PSYPACT states only can apply to the PSYPACT Commission for a Temporary Authorization to Practice (TAP). One required component of this authorization granted from the PSYPACT Commission is that psychologists must apply for and obtain an Interjurisdictional Practice Certificate (IPC) from ASPPB.

https://psypact.org/page/About

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National Compacts – Psychology

Arizona – AZ HB 2503 (Enacted on 5/17/2016)

Texas - TX HB 1501 (Enacted 6/10/2019)

Colorado - CO HB 1017 (Enacted 4/12/2018)

Utah - UT SB 106 (Enacted on 3/17/2017)

Delaware - DE HB 172 (Enacted 6/27/2019)

Virginia - VA SB 760 (Enacted 4/11/2020) *Effective

Georgia - GA HB 26 (Enacted 4/23/2019)

1/1/2021

Illinois - IL HB 1853 (Enacted 8/22/2018)

North Carolina - NC 361 (Enacted 7/1/2020) *Effective

Missouri - MO HB 1719/MO SB 660 (Enacted 6/1/2018)

3/1/2021

Nebraska - NE L 1034 (Enacted 4/23/2018)

New Hampshire- NH SB 232 (Enacted 7/10/2019)

Nevada - NV AB 429 (Enacted on 5/26/2017)

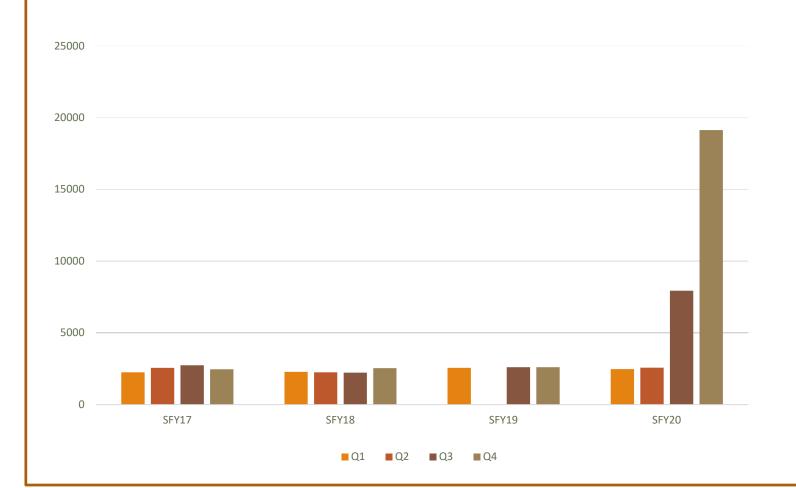
Oklahoma - OK HB 1057 (Enacted 4/29/2019)

Pennsylvania - PA SB 67 (Enacted 5/8/2020)



Telehealth/Tele-behavioral Health

Unique Rural Telehealth Users



Fewer no shows

- Transportation
- Single parents
- Reduced anxiety

Clients more forthcoming

More completion of Intensive Outpatient

More involvement of family



Framework for Licensing Reform

Ensure that Licensing Restrictions are Closely Targeted to Protecting Public Health and Safety, and are Not Overly Broad or Burdensome

- 1. In cases where public health and safety concerns are mild, consider using alternative systems that are less restrictive than licensing, such as voluntary State certification ("right-to-title") or registration (filing basic information with a State registry).
- 2. <u>Make sure that substantive requirements of licensing (e.g., education and experience requirements) are closely tied to public health and safety concerns.</u>
- 3. <u>Minimize procedural burdens of acquiring a license, in terms of fees, complexity of requirements, processing time, and paperwork.</u>
- 4. Where licensure is deemed appropriate, allow all licensed professionals to provide services to the full extent of their current competency, even if this means that multiple professions provide overlapping services.
- 5. Review licensing requirements for the formerly incarcerated, immigrants, and veterans to ensure that licensing laws do not prevent qualified individuals from securing employment opportunities, while still providing appropriate protections for consumers.

Framework for Licensing Reform

1. Carry out comprehensive cost-benefit assessments of licensing laws through both sunrise and regular sunset reviews;

2. Facilitate a Careful Consideration of Licensure's Costs and Benefits; and

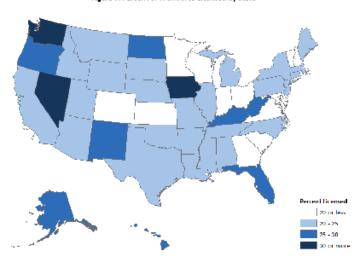
3. Work to Reduce Licensing's Barriers to Mobility.



Regulation and Licensing

Department of the Treasury Office of Economic Policy, the Council of Economic Advisers, and the Department of Labor: (2015) Occupational Licensing: A Framework For Policymakers. Washington, D.C. The White House

Figure 7. Percent of Workforce Licensed by State



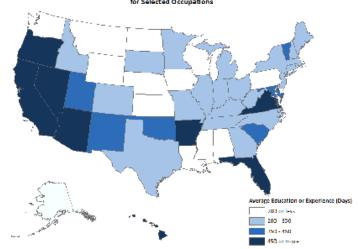
Some Street, and Street Indian (2019), Harris State

Table 1. Percent of Workforce Licensed by State										
State	Share Licensed	State	Share Licensed	State	Share Licensed	State	Share Licensed			
Alabama	20.9	Illinois	24.7	Montana	21.3	Rhode Island	14.5			
Alaska	25.5	Indiana	14.9	Nebraska	24.6	South Carolina	12.4			
Arizona	22.3	lowa	33.3	Nevada	30.7	South Dakota	21.8			
Arkansas	20.2	Kansas	14.9	New Hampshire	14.7	Tennessee	23.1			
California	20.7	Kentucky	27.8	New Jersey	20.7	Texas	24.1			
Colorado	17.2	Louisiana	22.3	New Mexico	25.9	Utah	23.8			
Connecticut	24.7	Maine	20.7	New York	20.7	Vermont	16.8			
Delaware	15.3	Maryland	17.2	North Carolina	22.0	Virginia	17.2			
District of Columbia	19.7	Massachusetts	21.3	North Dakota	26.6	Washington	30.5			
Florida	28.7	Michigan	20.6	Ohio	18.1	West Virginia	25.8			
Georgia	15.7	Minnesota	15.0	Oklahoma	25.0	Wisconsin	18.4			
Hawaii	26.6	Mississippi	23.1	Oregon	26.1	Wyoming	21.2			
Idaho	22.8	Missouri	21.3	Pennsylvania	20.2					

Source: Kleiner and Vorotnikov (2015), Harris data.

Note: Kleiner and Vorotnikov limited their analysis to individuals 18 or older who at the time of the survey were either currently employed or had been employed during the previous twelve months.

Figure 8: Average Education or Experience Required for Ucense by State for Selected Occupations



Super Granden et al 1980

note: sample of pozionier, and middle-skill pooperions. Hours averaged over all formed occupations the sample of poz, by state.

Table 2. Education/Experience Burdens by State (Days)										
State	Days	State	Days	State	Days	State	Days			
Alabama	182.0	Illinois	203.0	Montana	133.0	Rhode Island	211.0			
Alaska	179.0	Indiana	251.0	Nebraska	147.0	South Carolina	402.0			
Arizona	599.0	Iowa	181.0	Nevada	601.0	South Dakota	271.0			
Arkansas	689.0	Kansas	166.0	New Hampshire	230.0	Tennessee	222.0			
California	549.0	Kentucky	324.0	NewJersey	292.0	Texas	326.0			
Colorado	227.0	Louisiana	163.0	New Mexico	413.0	Utah	417.0			
Connecticut	230.0	Maine	226.0	New York	283.0	Vermont	402.0			
Delaware	195.0	Maryland	446.0	North Carolina	250.0	Virginia	462.0			
District of Columbia	311.0	Massachusetts	293.0	North Dakota	132.0	Washington	199.0			
Florida	603.0	Michigan	256.0	Ohio	341.0	West Virginia	247.0			
Georgia	324.0	Minnesota	290.0	Oldahoma	416.0	Wisconsin	145.0			
Hawali	724.0	Mississippi	155.0	Oregon	568.0	Wyoming	196.0			
Idaho	240.0	Missouri	220.0	Pennsylvania	113.0					

Source: Carpenter et al., 2012.

Note: Sample of 102 lower- and middle-skill occupations. Hours averaged over all licensed occupations from the sample of 102, by state.



Questions?